

a / IDS
E. Willis
4 - 26 - 02

SAW:lcm 12/04/01 6395-61321

PATENT



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Schiffenbauer
Application No.

Art Unit:

Filed: October 26, 2001

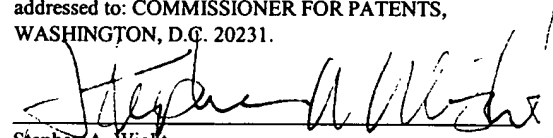
For: NON-DIRECTIONAL MAGNET FIELD
BASED PROXIMITY RECEIVER WITH
MULTIPLE WARNING AND MACHINE
SHUTDOWN CAPABILITY

Examiner:

Date: December 4, 2001

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service on December 4, 2001 as First Class Mail in an envelope addressed to: COMMISSIONER FOR PATENTS, WASHINGTON, D.C. 20231.


Stephen A. Wight
Attorney for Applicant

INFORMATION DISCLOSURE STATEMENT
PURSUANT TO 37 C.F.R. § 1.97(b)(3)

COMMISSIONER FOR PATENTS
WASHINGTON, DC 20231

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Sir:

Listed on the accompanying form PTO-1449 and enclosed herewith are several English-language documents. Applicant respectfully requests that these documents be listed as references cited on the issued patent.

Applicant filed this Information Disclosure Statement ("IDS") before the mailing date of a first Office action on the merits. As a result, no fee should be required to file this IDS.

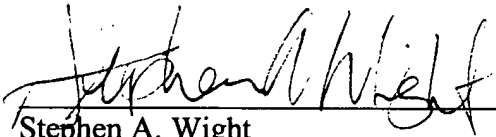
However, if the Patent Office determines that a fee is required for Applicant to file this

Information Disclosure Statement, please charge any such fees, or credit overpayment, to Deposit

Account No. 02-4550. A **duplicate** copy of this Information Disclosure Statement is enclosed.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

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10,045,441

PATENT
Attorney Reference Number 6395-61321 ✓

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2FC1 329-0

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In re application of: Schiffenbauer ✓ Art Unit:

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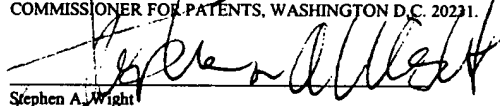
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Stephen A. Wight
Attorney for Applicant

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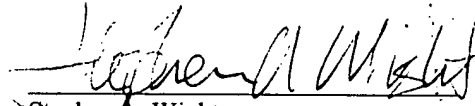
Enclosed for filing in the application referenced above are the following:

Technology Center 2600

- ☒ Information Disclosure Statement
- ☒ Form 1449 and references cited thereon
- ☒ The Director is hereby authorized to charge any additional fees that may be required, or credit overpayment, to Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

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cc: Docketing

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